**20**06 024399

2006 MAR 24 AM 11: 47

## RECORDINGONSEWEROMEN RECORDER

FOR A VALUABLE CONSIDERATION, THE RECEIPT WHEREOF IS HEREBY ACKNOWLEDGED, A CERTAIN SEWAGE LIEN EXISTING IN FAVOR OF THE GARY SANITARY DISTRICT, 3600 WEST THIRD AVENUE, GARY, INDIANA 46406, AND AGAINST GARCIA, MOSES, 1117 MARYLAND STREET, GARY, IN 46407

ON THE FOLLOWING REAL ESTATE TO-WIT:

AMOUNT:

\$ 346.70

KEY NUMBER:

25-44-0292-0004

GAY M. LOWERY

LEGAL DESCRIPTION:

GARY LAND CO'S  $10^{TH}$  SUB. LOT 4 BL.18

**COMMON ADDRESS:** 

1117 MARYLAND STREET MENT IS

A WRITTEN NOTICE OF AN INTENTION TO HOLD LIEN WHICH IS TO BE FILED IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, STATE OF INDIANA

STOMER SERVICE ACCOUNT COORDINATOR

ocument is the property of

ounty Recorder!

SIGNED:

PREPARED BY:

TITLE:

DATE:

STATE OF INDIANA )

) SS:

COUNTY OF LAKE

BEFORE ME THE UNDERSIGNED, A NOTARY PUBLIC FOR LAKE COUNTY, PERSONALLY APPEARED GAY M. WERY AND BEFORE ME ACKNOWLEDGED THE EXECUTION OF THIS INSTRUMENT THE DAY OF

\_, 2006.

NOTARY SIĞNATURE:

MARY M. BROWN Lake County My Commission Expires February 20, 2011

County form 170

Prescribed by the State Board of Accounts (2005)

## Declaration

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do herby affirm under the penalties of perjury unity Recorder!

- 1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
- 2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

Signature of Declarant

GAY M. LOWERY

Printed Name of Declarant